

<b>AGENCY NAME:</b>	South Carolina Department of Health & Environmental Control		
<b>AGENCY CODE:</b>	J040	<b>SECTION:</b>	34



**Fiscal Year 2014-15  
Accountability Report**

**SUBMISSION FORM**

**AGENCY MISSION**

<p><b>Our Mission:</b> To improve the quality of life for all South Carolinians by protecting and promoting the health of the public and the environment.</p> <p><b>Our Vision:</b> Healthy people living in healthy communities</p> <p><b>Our Values:</b></p> <ul style="list-style-type: none"> <li>• Pursuing Excellence</li> <li>• Inspiring Innovation</li> <li>• Promoting Teamwork</li> <li>• Embracing Service</li> </ul>
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Please identify your agency's preferred contacts for this year's accountability report.

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I have reviewed and approved the enclosed FY 2014-15 Accountability Report, which is complete and accurate to the extent of my knowledge.

**AGENCY DIRECTOR**  
**(SIGN/DATE):**

*Catherine E. Heigel*

**(TYPE/PRINT NAME):**

Catherine E. Heigel, Director S.C. Department of Health and Environmental Control

**BOARD/CMSN CHAIR**  
**(SIGN/DATE):**

*Allen Amsler*

**(TYPE/PRINT NAME):**

Allen Amsler, Chairman, SC Board of Health and Environmental Control

## AGENCY'S DISCUSSION AND ANALYSIS

The South Carolina Department of Health and Environmental Control (DHEC) is an agency undergoing transformation – new leadership, new priorities, and a new approach to the way we do business.

Over the last three months, under the leadership of Director Catherine Heigel, DHEC has established a new executive management team that is in the process of creating a strategic plan to guide our 3,400 employees in fulfilling our vision of healthy people living in healthy communities. This new roadmap will chart a path towards modernization in service delivery, build on our existing successes, and aim to establish DHEC as a model of operational excellence in state government.

Our goal: To be the preeminent state public health and environmental protection agency in the nation.

To do this, we will need to rebuild our team, reinvest in our infrastructure, and strengthen our partnerships across the state. Our primary areas of focus – both from a budgetary and programmatic perspective – center on the following five priority areas:

- **Information Access:** Leveraging new technologies to increase accessibility and timeliness of health and environmental information to both internal and external customers.
- **Customer Service:** Promoting continuous improvement and innovation goals for improving customer service delivery, policies, and practices.
- **Infrastructure Stabilization:** Expanding the capacity and increasing the reliability of our IT infrastructure.
- **Facility Improvement:** Ensuring workspaces for our teams across the state are functional, safe, clean, cost-effective, and environmentally conscious.
- **Preferred Employer:** Maximizing the job satisfaction of current teams and providing an efficient and welcoming recruitment and onboarding process for new and future team members.

As we work to complete our new strategic plan, we are also developing a corresponding budget to ensure that we have adequate resources to address these priority areas and fulfill our mission of promoting and protecting the health of the public and the environment. The new strategic plan and agency budget will be completed in Fall 2015.

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Strategic Planning Template

Agency Name: **SCDHEC**

Agency Code: **J04**

MP	Goal	Item # Strat	Object	Description
G				Increase support to and involvement by communities in developing healthy and environmentally sound communities
S	1.1			Increase support to develop healthy communities
O	1.1.1			Assist communities in developing community-based health improvement plans
O	1.1.2			Building the capacity of DHEC and community staff at the local level to retrieve, analyze and present data
O	1.1.3			Improve partnerships with other state agencies to better impact the public's health and environment
O	1.1.4			Support the development and funding of a statewide trauma system
S	1.2			Protect the public against food-, water- and vector-borne diseases
O	1.2.1			Map the location of septic tanks and wells statewide
O	1.2.2			Work with local governments to improve maintenance of septic tanks
O	1.2.3			Reduce food-borne disease outbreaks
O	1.2.4			Reduce the impact of vector-borne diseases and potential rabies exposures
O	1.2.5			Protect public drinking water
S	1.3			Promote a coordinated, comprehensive public health preparedness and response system for natural or man-made disasters or terrorist events
O	1.3.1			Develop a Public Health Emergency Management Plan and procedures integrated into the state Emergency Operations Plans and State Homeland Security Strategy
O	1.3.2			Provide necessary equipment to staff and community partners to enable safe responses
O	1.3.3			Improve public health capabilities to detect, prevent and respond to natural disasters, technological disasters or acts of terrorism.
S	1.4			Work with local governments and communities to improve land use plans to balance growth and natural resource protection
O	1.4.1			Partner with local governments and communities to encourage and improve land use planning and natural resource protection
O	1.4.2			Increase agency participation in efforts to address broad statewide and regional natural resource protection and land use planning
S	1.5			Expand public knowledge of and involvement in environmental and health issues
O	1.5.1			Increase public awareness through health and environmental education, publications, presentations and the DHEC Web site
O	1.5.2			Encourage public participation in DHEC activities whenever appropriate
G	2			Improve the quality and years of healthy life for all.
S	2.1			Promote healthy behaviors
O	2.1.1			Develop effective state and local partnerships to promote healthy behaviors including good nutrition, physical activity and tobacco use cessation
O	2.1.2			Provide best practices, consultation and training regarding risk reduction/health promotion programs and policies
O	2.1.3			Implement interventions to prevent tobacco use, promote cessation and reduce exposure to secondhand smoke
O	2.1.4			Collaborate with public and private partners to develop and implement statewide prevention plans targeting diabetes, cardiovascular health, cancer, injury, tobacco, obesity or associated risk factors.
O	2.1.5			Provide education and information to providers on the importance of prevention and early detection of major cancers.
O	2.1.6			Develop and implement a model employee-focused wellness program at DHEC.
S	2.2			Reduce the occurrence of vaccine preventable diseases
O	2.2.1			Maintain and improve immunization rates among children age 19 to 35 months
O	2.2.2			Improve influenza and pneumococcal vaccination coverage among adults, 65 years and older, and decrease the coverage disparity between white and minority seniors
O	2.2.3			Develop and implement an Immunization Registry
O	2.2.4			Increase the percent of public vaccine provider assessments of immunization levels within the past two years.
O	2.2.5			Identify and secure resources to support the implementation of recommended vaccines
S	2.3			Improve maternal and child health
O	2.3.1			Increase the percent of newborns receiving a newborn home visit.
O	2.3.2			Risk assess and refer appropriately all pregnant women who are public health department clients
O	2.3.3			Review all infant deaths and unexplained or unexpected child deaths
O	2.3.4			Increase the percent of the targeted population who receive Women, Infants and Children (WIC) nutrition services
O	2.3.5			Increase the percent of infants who are breastfed.
O	2.3.6			Increase the percent of newborn children who receive screenings and follow-up for hearing impairment, inborn errors of metabolism and hemoglobinopathies.
O	2.3.7			Identify, secure resources and implement a statewide initiative that addresses asthma incidence.
O	2.3.8			Improve reproductive health services to women and men in need

S	2.4	Improve the quality of life for seniors living at home and in long-term care facilities
O	2.4.1	Raise awareness among seniors, family caregivers and providers of elder care on ways to reduce injuries to seniors due to falls
O	2.4.2	Maintain access to home health services.
U	2.4.3	Collaborate with public and private partners to promote healthy aging.
S	2.5	Improve access to comprehensive, high quality care
O	2.5.1	Increase the number of medical home partnerships for pregnant women, children and children with special health care needs
O	2.5.2	Improve the effectiveness of the BabyNet program. <b>(Obsolete program is no longer a DHEC Program)</b>
O	2.5.3	Expand the breast and cervical cancer treatment programs
O	2.5.4	Improve the quality of emergency medical services throughout South Carolina, particularly in rural and underserved areas
O	2.5.5	Increase the percent of federally qualified and rural health care centers that have integrated "Clinical Preventive Services" into their daily practices
G	3	Eliminate health disparities
S	3.1	Reduce disparities in the incidence and the impact of communicable diseases
O	3.1.1	Increase the number of community-based, minority-serving organizations that are implementing strategies to address HIV
O	3.1.2	Strengthen the capacity of community-based organizations and local public health departments to implement and evaluate effective STD/HIV prevention and care programs.
O	3.1.3	Increase the proportion of minority HIV-infected and high-risk persons receiving appropriate prevention, referral and care/treatment services.
O	3.1.4	Decrease the incidence of perinatal HIV transmission
O	3.1.5	Eliminate syphilis among South Carolina residents
O	3.1.6	Decrease the prevalence of chlamydia and gonorrhea.
O	3.1.7	Increase the percent of patients with newly diagnosed tuberculosis who complete therapy within 12 months.
S	3.2	Reduce disparities in illness, disability and premature deaths from chronic diseases
O	3.2.1	Increase the number of minorities with diabetes who receive recommended diabetes care (eye exams, foot exams, flu/pneumonia immunizations and A1c tests)
O	3.2.2	Increase the percent of high-risk minorities who receive diabetes information and/or diabetes self-management education
O	3.2.3	Develop and implement a social marketing-based educational program targeting African-American men that increases their awareness about the need for prostate screening
O	3.2.4	Increase the percent of minority women screened through the Best Chance Network program.
O	3.2.5	Increase the number of minorities at risk for heart attacks and stroke who are receiving education interventions.
O	3.2.6	Develop and implement community- and faith-based initiatives to address health disparities.
G	4	Protect, enhance and sustain environmental and coastal resources
S	4.1	Protect the environment to improve public health and safety
O	4.1.1	Collect data to assess and characterize environmental conditions
O	4.1.2	Increase areas in South Carolina where environmental standards for air, water, and land and waste management are met.
O	4.1.3	Reduce non-compliance of regulated activities and facilities to meet applicable protective standards.
O	4.1.4	Minimize the impact to public health and the environment from environmental emergencies, disasters and spills.
O	4.1.5	Reduce exposure to contaminants.
S	4.2	Enhance environmental and coastal resources
O	4.2.1	Promote improvement in environmental quality beyond current regulatory standards
O	4.2.2	Reduce the amount of waste generated.
O	4.2.3	Attain healthy and publicly accessible beaches
S	4.3	Restore impaired natural resources and sustain them for beneficial use.
O	4.3.1	Clean and restore Brownfields and other contaminated sites for beneficial uses.
O	4.3.2	Reduce direct and indirect loadings of pollutants to surface waters and groundwater.
S	4.4	Protect coastal and other sensitive areas
O	4.4.1	Protect sensitive and fragile areas against impacts from encroaching development and restore and/or enhance these areas as opportunities are presented
O	4.4.2	Coordinate with the research community to better direct research toward identified environmental management needs
O	4.4.3	Improve, in conjunction with other partners, education through outreach to the community, developers, local officials and the public.
G	5	Improve organizational capacity and quality
S	5.1	Provide continuous development of a competent and diverse workforce
O	5.1.1	Develop and implement a workforce plan in each deputy area that identifies areas of critical need, gaps, core competencies and training needs
O	5.1.2	Provide adequate workforce capacity building and knowledge transfer.
O	5.1.3	Implement an agency learning management system to automate the administration of training plans and events for all public health workers, health care providers and community response partners
O	5.1.4	Ensure that agency managers are using available and appropriate incentives to reward and recognize deserving employees.

- O 5.1.5 Improve agency recruitment strategies to increase the pool of qualified applicants
- S 5.2 Provide reliable, valid and timely information for internal and external decision-making
- O 5.2.1 Improve standards across the agency for collecting, processing and distributing data.
- O 5.2.2 Continue to develop Public Health Informatics infrastructure to improve data and system integration.
- O 5.2.3 Develop and maintain a management scorecard of measures to monitor agency progress on strategic plan goals and objectives.
- O 5.2.4 Improve and increase public health and environmental information available to the public through the agency Web site.
- O Complete DHEC's core data system integration of S. C. Vital Records and Statistics Integrated Information System (SCVRSIIS), Carolina Health Electronic Surveillance System (CHESS) and Client Automated Records and Encounter System (CARES)
- O Improve the analysis and dissemination of health disparities data.
- S 5.3 Ensure customer focus and cultural competence in the agency
- O Develop a standard set of agency criteria for creating customer-focused programs which: 1) identifies key customers, their expectations and requirements; 2) creates structured feedback mechanisms; and 3) allows feedback to be used to improve programs
- O 5.3.1 Assure that culturally and linguistically appropriate service policies and procedures are a part of each deputy area operational plan
- O 5.3.2 Evaluate and improve the effectiveness of the agency's cultural competency efforts.
- S 5.4 Improve the linkage between funding and agency strategic direction
- O 5.4.1 Evaluate and develop activity-based cost accounting systems that provide unit cost information on major agency functions.
- O 5.4.2 Implement improved budgeting processes to allow for better management of agency operations
- S 5.5 Improve operational efficiencies through the use of improved technology and facilities
- O 5.5.1 Increase the percent of staff who have access to and use appropriate information and communication technology
- O 5.5.2 Continue to pursue consolidation of the agency's facilities and workforce where appropriate.



Agency Name: **SC Dept. of Health And Environmental Control**  
 Agency Code: **J040** Section: **034**

Program/Title	FY 2014-15 Expenditures		FY 2014-15 Expenditures		TOTAL	Associated Objective(s)
	General	Other	General	Other		

I. Administration	\$ 6,006,818	\$ 11,844,580	\$ 77,051	\$ 17,928,448	\$ 7,802,641	\$ 1,039	\$ 18,953,288	1.5.1; 1.5.2; 2.1.6; 5.1.1; 5.1.2; 5.1.3; 5.1.4; 5.1.5; 5.2.1; 5.2.3; 5.2.4; 5.2.5; 5.2.6; 5.3.1; 5.3.2; 5.3.3; 5.4.1; 5.4.2; 5.5.1; 5.5.2
II. A. 1 Underground Storage Tanks	\$ 21,670,681	\$ 1,131,607	\$ -	\$ 22,802,289	\$ 793,275	\$ -	\$ 23,318,148	1.5.1; 1.5.2; 4.1.1; 4.1.2; 4.1.3; 4.1.4; 4.1.5; 4.4.1; 4.4.2; 4.4.3
II. A. 2 Water Quality Improvement	\$ 4,698,821	\$ 6,278,302	\$ 7,121,948	\$ 18,099,071	\$ 4,759,986	\$ 6,636,970	\$ 18,402,637	1.1.1; 1.1.2; 1.1.3; 1.2.1; 1.2.2; 1.2.3; 1.3.3; 1.4.1; 1.4.2; 1.5.1; 1.5.2
II. A. 3 Environmental Health	\$ 14,904,483	\$ 7,588,618	\$ 5,271,889	\$ 27,764,991	\$ 16,281,591	\$ 5,851,408	\$ 29,419,389	1.1.2; 1.1.3; 1.2.1; 1.2.2; 1.2.3; 1.2.4; 1.2.5
II. B. 1 Coastal Resource Improvement	\$ 840,561	\$ 267,820	\$ 1,858,541	\$ 2,966,922	\$ 786,070	\$ 1,979,069	\$ 2,886,228	1.1.1; 1.1.2; 1.1.3; 1.3.3; 1.4.1; 1.4.2; 1.5.1; 1.5.2; 4.1.1; 4.1.2; 4.1.3; 4.1.4; 4.1.5; 4.2.1; 4.2.2; 4.2.3; 4.4.1; 4.4.2; 4.4.3
II. C. Air Quality Improvement	\$ 2,397,994	\$ 3,717,672	\$ 1,845,620	\$ 7,961,286	\$ 2,200,825	\$ 1,367,750	\$ 7,902,771	1.1.1; 1.1.2; 1.1.3; 1.3.2; 1.3.3; 4.1.1; 4.1.2; 4.1.3; 4.1.4; 4.1.5
II. D. Land Quality Improvement	\$ 1,194,593	\$ 9,656,452	\$ 4,858,539	\$ 15,709,584	\$ 1,056,416	\$ 4,633,594	\$ 16,643,453	1.1.1; 1.1.2; 1.1.3; 1.4.1; 1.4.2; 1.5.1; 1.5.2; 4.3.1; 4.3.2; 4.4.1; 4.4.2; 4.4.3
II. E. 1 Family Health - Infectious Disease Prevention	\$ 15,234,266	\$ 12,187,440	\$ 42,508,708	\$ 69,930,414	\$ 15,297,711	\$ 36,810,554	\$ 67,779,273	1.1.1; 1.1.2; 1.1.3; 1.5.1; 1.5.2; 2.1.2; 2.2.1; 2.2.2; 2.2.3; 2.2.4; 3.1.1; 3.1.2; 3.1.3; 3.1.4; 3.1.5; 3.1.6; 3.1.7
II. E. 1. a Palmetto Aids Life Support	\$ 50,000	\$ -	\$ -	\$ 50,000	\$ -	\$ -	\$ 50,000	3.1.1; 3.1.2; 3.1.3; 3.1.4
II. E. 2 Maternal/Infant Health	\$ 1,854,749	\$ 37,670,506	\$ 91,859,886	\$ 131,385,142	\$ 2,251,920	\$ 98,997,699	\$ 138,270,523	1.1.1; 1.1.2; 1.1.3; 1.5.1; 1.5.2; 2.3.1; 2.3.2; 2.3.3; 2.3.4; 2.3.5; 2.3.6; 2.3.7; 2.3.8; 2.5.1; 5.2.1
II.E.2.a Continuation Teen Pregnancy Prevention	\$ -	\$ -	\$ -	\$ -	\$ 413,510	\$ -	\$ 413,510	



Agency Name: **SC Dept. of Health and Environmental Control**  
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Program/Title	Purpose	FY 2013-14 Expenditures			FY 2014-15 Expenditures			TOTAL	Associated Objective(s)
		General	Other	Federal	General	Other	Federal		

II.E.2.b Maternal & Infant Health- Newborn Screening	Provides mandated universal newborn hearing screening, prior to hospital discharge, to be conducted in hospitals with at least 100 births annually	\$ 398,068			\$ 398,068			\$ 413,663	2.3.1; 2.3.6
II.E.2.c Abstinence Until Marriage Emerging Prog	Promotes lifelong healthy eating and physical activity choices through comprehensive education and securing policy and environment changes that support sustainable changes	\$ 882,897	\$ 186,113	\$ 12,264,896	\$ 13,333,906	\$ 945,325	\$ 169,823	\$ 10,102,580	1.1.1; 1.1.2; 1.1.3; 1.5.1; 1.5.2; 2.1.1; 2.1.2; 2.1.3; 2.1.4; 2.1.5; 2.1.6; 2.5.3; 2.5.5; 3.1.1; 3.1.2; 3.2.1; 3.2.2; 3.2.3; 3.2.4; 3.2.5; 3.2.6
II. E. 3. a Youth Smoking	The development of and participation in a youth movement against tobacco, modeled on successful programs in other states is a primary activity of the Division of Tobacco Prevention and Control	\$ 3,118,859			\$ 3,118,859		\$ 7,569,068	\$ 7,569,068	1.1.1; 1.1.2; 1.1.3; 1.5.1; 1.5.2; 2.1.1; 2.1.2; 2.1.3; 2.1.4
II. E. 4 Accessing Public Health Services	Provides the basic infrastructure funding for the operation of local county health departments. These resources support all public health programs.	\$ 17,323,477	\$ 8,784,032	\$ 13,003,374	\$ 39,110,883	\$ 18,902,980	\$ 7,394,359	\$ 13,568,230	1.1.1; 1.1.2; 1.1.3; 1.3.1; 1.3.2; 1.3.3; 1.5.1; 1.5.2; 2.1.1; 2.1.2; 2.1.3; 2.1.4; 2.1.5; 2.1.6; 2.2.1; 2.2.2; 2.3.2; 2.3.4; 2.3.8; 2.3.3; 2.5.1; 2.5.5; 3.1.1; 3.1.2; 3.1.3; 3.1.4; 3.1.5; 3.1.6; 3.1.7; 3.2.1; 3.2.2; 3.2.3; 3.2.4; 3.2.5; 3.2.6
II. E. 5 Drug Control	Regulates and enforces the laws that govern pharmacies and the dispensing of controlled substances.	\$ 2,218,567	\$ 50,570	\$ 2,269,137	\$ 2,269,137	\$ -	\$ 2,598,585	\$ 58,344	5.2.4; 5.5.1
II.E.6 Rape	Provides technical support to DHEC state and local staff and contracts with the 16 rape crisis centers throughout the state in service delivery and prevention activities	\$ 1,337,681	\$ 881,832	\$ 2,219,513	\$ 2,219,513	\$ 1,339,325	\$ 807,428	\$ 2,146,753	1.1.1; 1.1.2; 1.1.3; 2.1.2; 2.5.4;
II. E. 7 Independent Living	This program provides many in-home services such as skilled nurses; provides services to special needs clients to live more independent lives; and provides screening, testing, education counseling and managed care.	\$ 5,158,625	\$ 18,246,184	\$ 2,086,651	\$ 25,491,460	\$ 5,777,889	\$ 18,631,018	\$ 4,534,452	1.1.1; 1.1.2; 1.1.3; 2.1.1; 2.1.2; 2.1.3; 2.1.4; 2.1.5; 2.1.6; 2.2.2; 2.2.4; 2.2.5; 2.4.1; 2.4.2; 2.4.3; 2.5.1
II. E. 7. b Sickle Cell Prof. Education	Provides funding for professional Sickle Cell Education in the hospital setting	\$ 100,000			\$ 100,000	\$ 100,000		\$ 100,000	1.1.1; 1.1.2; 1.1.3; 2.3.6; 2.5.1
II. F. 1 Health Care Standards- Radiological Health	Registers, licenses and inspects sources of radiation, including radioactive materials, x-ray machines, CT scanners, mammography units and baggage/security units.	\$ 789,754	\$ 668,271	\$ 62,463	\$ 1,520,488	\$ 858,982	\$ 610,449	\$ 45,752	1.1.2; 1.1.3; 1.5.1



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Program/Title	Purpose	FY 2013-14 Expenditures		FY 2014-15 Expenditures		TOTAL	Associated Objective(s)
		General	Other	General	Other		

II. F. 2. Health Care Standards-Health Facilities and Services Development	Promotes cost containment, prevents unnecessary duplication of health care facilities and services, guides the establishment of health facilities and services that best serve the public need.	\$ 2,857	\$ -	\$ 2,857	\$ 1,427,767	\$ 1,427,767	1.1.2; 1.1.3; 1.5.1
II. F. 3 Health Care Standards- Health Facilities Licensing	Ensures individuals receiving services are from health care activities licensed by DHEC. Ensures that clients are provided appropriate care and services in a manner and environment that promotes their health, safety and well-being.	\$ 1,628,925	\$ 557,908	\$ 2,186,832	\$ 1,661,490	\$ 2,993,462	1.1.2; 1.1.3; 1.5.1
II.F.4 Health Care Standards - Certification	Ensures all residents, patients and clients of health care providers who receive Medicare or Medicaid payments are afforded the quality of care, which will attain the highest practicable level of well-being.	\$ 3,589,344	\$ -	\$ 3,589,344	\$ 3,588,910	\$ 3,588,910	1.1.2; 1.1.3
II. F. 5. Health Care Standards - Emergency Medical Services	Develops and coordinates the system of emergency care for victims of sudden or serious illness or injury, including licensing and inspection of ambulance services and certification of medical technicians.	\$ 1,556,788	\$ 910,546	\$ 2,556,715	\$ 1,402,450	\$ 1,755,337	1.1.2; 1.1.3; 1.1.4; 1.5.1; 2.5.4
II.F.5.a Trauma Center Fund	Develops and coordinates the system of emergency care for victims of sudden or serious illness or injury, including licensing and inspection of ambulance services and certification of medical technicians.	\$ 2,356,679	\$ -	\$ 2,356,679	\$ 2,281,270	\$ 2,281,270	1.1.2; 1.1.3; 1.1.4; 1.5.1; 2.5.4
II.G.1 Health Surveillance Support Services - Health Laboratory	Assures that integrated, accurate and cost effective laboratory testing is available to support public health	\$ 1,069,151	\$ 7,441,044	\$ 2,308,297	\$ 1,377,025	\$ 12,476,651	2.3.8; 3.1.2; 3.1.3
II. G. 2 Health Surveillance Support Services - Vital Records	Provides for the registration, correction and certification of all vital events (births, deaths, marriages and divorces).	\$ 123,242	\$ 3,419,754	\$ 1,635,347	\$ 101,886	\$ 4,914,219	2.3.3; 5.2.4; 5.2.5
III. Employee Benefits - State Employer Contributions	Employer portion of state retirement, social security, health insurance, dental insurance, workers compensation and unemployment insurance.	\$ 15,844,241	\$ 13,556,899	\$ 19,131,217	\$ 17,901,681	\$ 51,115,765	
Remainder of Expenditures						\$ -	



Fiscal Year 2014-15  
Accountability Report



Agency Name: **SC Dept. of Health And Environmental Control**  
 Agency Code: **J040** Section: **034**

Program/Title	Purpose	FY 2013-16 Expenditures			FY 2014-15 Expenditures			TOTAL	Associated Objectives(s)
		General	Other	Federal	General	Other	Federal		
Florence County HVAC; Florence County Repairs; SC Birth Defects; SC Bleeding Disorder; James R. Clark Sickie Cell; Youth Tobacco Program & Cessation; Best Chance Network; Ocean Water Quality; Community Health Centers; Donate Life; ADAP Prevention; SC Coalition Against Domestic Violence; Kidney Disease Early Evaluation; HIV Prevention-Project Faith; Beach Renourishment; Nurse Family Partnership; Beach Renourishment Trust Fund	Various supplemental appropriations and expenditures.	\$ 4,425,014	\$ 79,658	\$ -	\$ 7,279,023	\$ 2,296,010	\$ 2,843	\$ 9,577,876	1.1.1; 1.1.2; 1.1.3; 1.3.3; 1.4.1; 1.4.2; 1.5.1; 1.5.2; 2.1.1; 2.1.2; 2.1.3; 2.1.4; 2.1.5; 2.1.6; 2.2.1; 2.2.2; 2.2.4; 2.2.5; 2.3.1; 2.3.2; 2.3.3; 2.3.4; 2.3.6; 2.3.8; 2.4.1; 2.4.2; 2.4.3; 2.5.1; 2.5.3; 2.5.4; 2.5.5; 3.1.1; 3.1.2; 3.1.3; 3.1.4; 3.1.5; 3.1.6; 3.1.7; 3.2.1; 3.2.2; 3.2.3; 3.2.4; 3.2.5; 3.2.6; 4.1.1; 4.1.2; 4.1.3; 4.1.4; 4.1.5; 4.2.1; 4.2.2; 4.4.1; 4.4.2; 4.4.3; 5.2.1
		\$ 100,179,682	\$ 170,049,907	\$ 211,637,162	\$ 481,866,751	\$ 111,851,426	\$ 183,066,671	\$ 213,580,631	\$ 508,498,729

Based on 424 7/27/2015

Agency Name: SC Dept. Of Health and Environmental Control

Agency Code: J040 Section: 034

Item	Performance Measure	Last Value	Current Value	Target Value	Time Applicable	Data Source and Availability	Reporting Freq.	Calculation Method	Performance Measurement Template Associated Objective(s)
1	National Ambient Air Quality Standards - Ozone Primary Standard								
Abbeyville	0.060	0.061	0.075 or less	2014	SC Ambient Air Monitoring Network	Annually	3 year average of annual 4th highest daily maximum 8-hour average ozone concentration	4-A-1; 4-A-2; 4-A-3; 4-A-4; 4-A-5	
Aiken	0.062	0.061	0.075 or less	2014	SC Ambient Air Monitoring Network	Annually	3 year average of annual 4th highest daily maximum 8-hour average ozone concentration	4-A-1; 4-A-2; 4-A-3; 4-A-4; 4-A-5	
Anderson	0.068	0.062	0.075 or less	2014	SC Ambient Air Monitoring Network	Annually	3 year average of annual 4th highest daily maximum 8-hour average ozone concentration	4-A-1; 4-A-2; 4-A-3; 4-A-4; 4-A-5	
Berkeley	0.061	0.059	0.075 or less	2014	SC Ambient Air Monitoring Network	Annually	3 year average of annual 4th highest daily maximum 8-hour average ozone concentration	4-A-1; 4-A-2; 4-A-3; 4-A-4; 4-A-5	
Charleston	0.063	0.060	0.075 or less	2014	SC Ambient Air Monitoring Network	Annually	3 year average of annual 4th highest daily maximum 8-hour average ozone concentration	4-A-1; 4-A-2; 4-A-3; 4-A-4; 4-A-5	
Cherokee	0.066	0.065	0.075 or less	2014	SC Ambient Air Monitoring Network	Annually	3 year average of annual 4th highest daily maximum 8-hour average ozone concentration	4-A-1; 4-A-2; 4-A-3; 4-A-4; 4-A-5	
Chesterfield	0.062	0.060	0.075 or less	2014	SC Ambient Air Monitoring Network	Annually	3 year average of annual 4th highest daily maximum 8-hour average ozone concentration	4-A-1; 4-A-2; 4-A-3; 4-A-4; 4-A-5	
Colleton	0.056	0.055	0.075 or less	2014	SC Ambient Air Monitoring Network	Annually	3 year average of annual 4th highest daily maximum 8-hour average ozone concentration	4-A-1; 4-A-2; 4-A-3; 4-A-4; 4-A-5	
Darlington	0.066	0.064	0.075 or less	2014	SC Ambient Air Monitoring Network	Annually	3 year average of annual 4th highest daily maximum 8-hour average ozone concentration	4-A-1; 4-A-2; 4-A-3; 4-A-4; 4-A-5	
Edgefield	0.058	0.055	0.075 or less	2014	SC Ambient Air Monitoring Network	Annually	3 year average of annual 4th highest daily maximum 8-hour average ozone concentration	4-A-1; 4-A-2; 4-A-3; 4-A-4; 4-A-5	
Greenville	0.067	0.065	0.075 or less	2014	SC Ambient Air Monitoring Network	Annually	3 year average of annual 4th highest daily maximum 8-hour average ozone concentration	4-A-1; 4-A-2; 4-A-3; 4-A-4; 4-A-5	
Greenville	0.063	0.061	0.075 or less	2014	SC Ambient Air Monitoring Network	Annually	3 year average of annual 4th highest daily maximum 8-hour average ozone concentration	4-A-1; 4-A-2; 4-A-3; 4-A-4; 4-A-5	
Oconee	0.059	0.060	0.075 or less	2014	SC Ambient Air Monitoring Network	Annually	3 year average of annual 4th highest daily maximum 8-hour average ozone concentration	4-A-1; 4-A-2; 4-A-3; 4-A-4; 4-A-5	
Pickens	0.067	0.063	0.075 or less	2014	SC Ambient Air Monitoring Network	Annually	3 year average of annual 4th highest daily maximum 8-hour average ozone concentration	4-A-1; 4-A-2; 4-A-3; 4-A-4; 4-A-5	
Pickens	0.064	0.059	0.075 or less	2014	SC Ambient Air Monitoring Network	Annually	3 year average of annual 4th highest daily maximum 8-hour average ozone concentration	4-A-1; 4-A-2; 4-A-3; 4-A-4; 4-A-5	
Richland	0.065	0.058	0.075 or less	2014	SC Ambient Air Monitoring Network	Annually	3 year average of annual 4th highest daily maximum 8-hour average ozone concentration	4-A-1; 4-A-2; 4-A-3; 4-A-4; 4-A-5	
Richland	0.069	0.064	0.075 or less	2014	SC Ambient Air Monitoring Network	Annually	3 year average of annual 4th highest daily maximum 8-hour average ozone concentration	4-A-1; 4-A-2; 4-A-3; 4-A-4; 4-A-5	

Richland	0.057	0.055	0.075 or less	2014	SC Ambient Air Monitoring Network	Annually	3 year average of annual 4th highest daily maximum 8-hour average ozone concentration	4-A-1; 4-A-2; 4-A-3; 4-A-4; 4-A-5
Spartanburg	0.072	0.066	0.075 or less	2014	SC Ambient Air Monitoring Network	Annually	3 year average of annual 4th highest daily maximum 8-hour average ozone concentration	4-A-1; 4-A-2; 4-A-3; 4-A-4; 4-A-5
York	0.063	0.060	0.075 or less	2014	SC Ambient Air Monitoring Network	Annually	3 year average of annual 4th highest daily maximum 8-hour average ozone concentration	4-A-1; 4-A-2; 4-A-3; 4-A-4; 4-A-5
2 Hazardous Waste Site Cleanup Actions (% of sites undergoing cleanup)	69%	77%	NA	7/1/2014-6/30/2015	EFIS	Annually	4.1.1; 4.1.2; 4.1.3; 4.1.4; 4.1.5; 4.2.1; 4.3.1; 4.3.2	
3 Underground Storage Tank (UST) Cleanups Complete	7,420	7,571	7,570	7/1/2014-6/30/2015	EFIS	Annually	4.1.1; 4.1.2; 4.1.3; 4.1.4; 4.1.5; 4.2.1; 4.3.1; 4.3.2	
4 Uncontrolled Waste Sites Status	Status is captured in next 3 rows							
4 Open Sites	1,084	1,215	NA	7/1/2014-6/30/2015	EFIS	Annually	4.1.1; 4.1.2; 4.1.3; 4.1.4; 4.1.5; 4.2.1; 4.3.1; 4.3.2	
4 Closed Sites	2,616	2,697	NA	7/1/2014-6/30/2015	EFIS	Annually	4.1.1; 4.1.2; 4.1.3; 4.1.4; 4.1.5; 4.2.1; 4.3.1; 4.3.2	
4 Total Sites	3,700	3,912	NA	7/1/2014-6/30/2015	EFIS	Annually	4.1.1; 4.1.2; 4.1.3; 4.1.4; 4.1.5; 4.2.1; 4.3.1; 4.3.2	
5 Voluntary Cleanup Program Accomplishments	Status is captured in next 3 rows							
5 Voluntary Clean-up Contracts Signed	429	495	NA	7/1/2014-6/30/2015	EFIS	Annually	4.1.1; 4.1.2; 4.1.3; 4.1.4; 4.1.5; 4.2.1; 4.3.1; 4.3.2	
5 Voluntary Clean-up Contracts Completed	150	261	NA	7/1/2014-6/30/2015	EFIS	Annually	4.1.1; 4.1.2; 4.1.3; 4.1.4; 4.1.5; 4.2.1; 4.3.1; 4.3.2	
5 Acres Restored Under Brownfield Program	5,912	6,821	NA	7/1/2014-6/30/2015	EFIS	Annually	4.1.1; 4.1.2; 4.1.3; 4.1.4; 4.1.5; 4.2.1; 4.3.1; 4.3.2	
6 SC Population Served by Community Drinking Water Systems in Full Compliance	98%	94%	99%	1/12/2013-12/31/2013	SDWIS	Annually	1.2.1; 1.2.2; 1.2.5; 4.1.1; 4.1.2; 4.1.3; 4.1.4; 4.1.5; 4.2.1; 4.3.1; 4.3.2	
7 Waters Supporting Fishable/Swimmable Uses	72.60%	72.50%	75% by 2014	2008-2012	SC Integrated Report, Section 305b	Biennial	1.1.1; 1.1.2; 1.1.3; 1.5.1; 1.5.2; 2.1.1; 2.1.2; 2.1.3; 2.1.4; 2.1.5; 2.1.6; 2.2.5; 3.2.3; 3.2.4	
8 Average Number of Unannounced and Follow-up Food Facility Inspections per Facility	2.1	1.6	4	7/1/2014-6/30/2015	Steton	Annually	1.2.3	
9 Actual Number of FTE Equivalent Inspectors	81	89		7/1/2014-6/30/2015	Steton	Annually	1.2.3	
9 Number of FTE Equivalent Inspectors needed to meet standard	124	125	125	7/1/2014-6/30/2015	Steton	Annually	1.2.3	
10 SNAP Contacts	16,378	21,380	21,291	10/1/2013-9/30/2014	USDA EARS	Annually	1.1.1; 1.1.2; 1.1.3; 1.5.1; 1.5.2; 2.1.1; 2.1.2; 2.1.3; 2.1.4; 2.1.5; 2.1.6	
11 Best Chance Network Percentage of Abnormal Breast Screenings with Completed Diagnostic Work-up	95%	95%	90%	1/1/2014-12/31/2014	Medt-IT system	Annually	Number of women in abnormal breast screenings and completed diagnostic work-up/ Number of women and abnormal breast screenings	
12 Family Planning Caseload	89,175	91,029	90,000	FY 2015	CARES - Clinical Information System	Annually	Number of unduplicated users served in FP during applicable time period.	
13 WIC Total Participation	115,857	113,218	132,945	FY 2015	CARES - Clinical Information System	Annually	2.3.1; 2.3.2; 2.3.3; 2.3.4	

14	Vaccine Cover Among Adolescents 13-17 Years Old, SC, TDaP	64.9%	72.60%	80%	2014	National Imz Survey (NIS), updated annually released in late July or August	Annually	Data as reported by CDC	2.2.1; 2.2.2; 2.2.3; 2.2.4 2.2.5
15	South Carolina Tobacco Quitline Call Volume	15,575	16,760	15,000	7/1/14-6/30-15	Quitline Monitoring Reports	Annually	Annual sum of monthly call volume reports	2.1.1; 2.1.2; 2.1.3; 2.1.4;